

**IGNITION INTERLOCK PROGRAM  
VARIABLE CALIBRATION NOTIFICATION**



In accordance with [Washington Administrative Code 204-50-070](#), certified interlock manufacturer,

Draeger       Intoxalock       LifeSafer       Simple       Smart Start

Hereby provides official written notice to the Washington State Patrol (WSP) of a variable calibration of an ignition interlock device with a preset fail level **other than .020 BrAC**.

**Fail Level Set At:** \_\_\_\_\_

Requested by:  Originating Court\*     \_\_\_\_\_

\*A copy of the court order must be attached when this form is submitted.

Interlock Restricted Driver

\_\_\_\_\_  
Restricted Driver's Name (Last, First, Middle Initial)      Date of Birth

\_\_\_\_\_  
Driver's License Number      State of Issuance

Vehicle Interlock Installed

\_\_\_\_\_  
License Plate      License State      Vehicle Color

\_\_\_\_\_  
Vehicle Year      Vehicle Make      Vehicle Model

\_\_\_\_\_  
Vehicle Identification Number (VIN)

Installation Information

_____ Installation Date	_____ Projected Removal Date	_____ Technician WSP Cert. ID	_____ Service Center WSP Cert. ID	_____ WSP Region No.
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I declare under penalty of perjury under the law of Washington that the foregoing is true and correct.

\_\_\_\_\_  
Printed Name of Manufacturer Representative      Date

\_\_\_\_\_  
Signature of Manufacturer Representative\*      Location Signed (City, State)

\*(Electronic signature is acceptable if name matches e-mail account)

*A completed copy of this form must be emailed to [ignition.interlock@wsp.wa.gov](mailto:ignition.interlock@wsp.wa.gov) within seven days of the installation date above. This form is in addition to, and does not replace, the Interlock Installation Verification form, which must be completed separately.*